FCC Foi	rm 481 - Carrier Annual Reporting Data Collection Form		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	300658	
<015>	Study Area Name	SYCAMORE TEL CO	
<020>	Program Year	2018	
<030>	Contact Name: Person USAC should contact with questions about this data	Shelley Ross	
<035>	Contact Telephone Number: Number of the person identified in data line <030>	4129276012 ext.	
<039>	Contact Email Address: Email of the person identified in data line <030>	shelley.ross@syctelco.com	
	Form Type	54.313 and 54.422	

(200) Service Outage Reporting (Voice)	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013

y Area Code y Area Name ram Year act Name - Person US act Telephone Numb act Email Address - Er the prior calendar y	r - Number of per nail Address of per	rson identified rson identified	in data line <0 I in data line <0	)30> shelley.ros	ss					
ram Year act Name - Person US act Telephone Numb act Email Address - Er	r - Number of per nail Address of per	rson identified rson identified	in data line <0 I in data line <0	2018 Shelley Ros 30> 4129276012 30> shelley.ros	ext. ess@syctelco.com					
act Name - Person US act Telephone Numb act Email Address - En	r - Number of per nail Address of per	rson identified rson identified	in data line <0 I in data line <0	Shelley Ros 4129276012 330> shelley.ros	ext. ss@syctelco.com					
act Telephone Numb act Email Address - Er	r - Number of per nail Address of per	rson identified rson identified	in data line <0 I in data line <0	30> 4129276012 030> shelley.ros	ext. ss@syctelco.com					
act Email Address - Er	nail Address of per	rson identified	l in data line <0	)30> shelley.ros	ss@syctelco.com					
	'									
the prior calendar v	ear. were there	any reportab	nle voice serv	ico outages?	No					
	. ,	, , ,	ore voice serv	ice outages!						
<a> <b1></b1></a>	<b2></b2>	<b3></b3>	<b4></b4>	<c1></c1>	<c2></c2>	<d></d>	<e></e>	<f></f>	<g></g>	<h></h>
iors Ference Outage Sta	Outage Start Time	Outage End Date	Outage End Time	Number of Customers Affected	Total Number of Customers	911 Facilities Affected (Yes / No)	Service Outage Description (Check all that apply)	Did This Outage Affect Multiple Study Areas (Yes / No)	Service Outage Resolution	Preventative Procedures
er	rence Outage Star	rence Outage Start Outage Start	rence Outage Start Outage Start Outage End	rence Outage Start Outage Start Outage End Outage End	rence Outage Start Outage Start Outage End Outage End Number of	rence Outage Start Outage Start Outage End Outage End Outage End Customers Affected Total Number of	rence Outage Start Outage Start Outage End Outage End Outage End Customers Affected Total Number of Affected	rence Outage Start Outage Start Outage End Outage End Outage End Date Time Outage End Customers Affected Total Number of Affected Description (Check	rence Outage Start Outage Start Outage End Outage End Outage End Date Time Outage End Customers Affected Total Number of Affected Description (Check Study Areas	rence Outage Start Outage Start Outage End Outage End Date Time Outage End Customers Affected Total Number of Affected Description (Check Study Areas Service Outage

NORS Reference Number	Outage Start Date	Outage Start Time	Outage End Date	Outage End Time	Number of Customers Affected	Total Number of Customers	911 Facilities Affected (Yes / No)	Service Outage Description (Check all that apply)	Did This Outage Affect Multiple Study Areas (Yes / No)	Service Outage Resolution	Preventative Procedures
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											<del>                                     </del>

•	fulfilled Service Request ection Form			FCC Form 481 OMB Control No. 3060-0986/OMB Control July 2013	No. 3060-0819
<010>	Study Area Code	300658			
<015>	Study Area Name	SYCAMORE TEL CO			
<020>	Program Year	2018			
<030>	Contact Name - Person USAC should contact regarding this data	Shelley Ross			
<035>	Contact Telephone Number - Number of person identified in data line <030>	4129276012 ext.			
<039>	Contact Email Address - Email Address of person identified in data line <030>	shelley.ross@syctelco.com			
<300> U	nfulfilled service request (voice)	0			
<310> [	Detail on attempts (voice)				
	Na	me of Attached Document			
<320>	Unfulfilled service request (broadband)	0			
<330>	Detail on attempts (broadband)				-
		Name of Attached Document			

(400) Number of Complaints per 1,000 customers	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013

<010>	Study Area Code	300658	
<015>	Study Area Name	SYCAMORE TEL CO	
<020>	Program Year	2018	
<030>	Contact Name - Person USAC should conta	ct regarding this data Shelley Ros	s
<035>	Contact Telephone Number - Number of p <030>		76012 ext.
<039>	Contact Email Address - Email Address of p <030>	person identified in data line she	lley.ross@syctelco.com
<400>	Select from the drop-down list to indicate voice complaints (zero or greater) for voice calendar year for each service area in which any facilities you own, operate, lease, or or	telephony service in the prior conyou are designated an ETC for	Offered only fixed voice
<410>	Complaints per 1000 customers for fixed v	oice 0.	0
<420>	Complaints per 1000 customers for mobile	voice	
<430>	Select from the drop-down list to indicate end-user customer complaints (zero or greather prior calendar year for each service are an ETC for any facilities you own, operate,	ater) for broadband service in Cara in which you are designated	offered only fixed broadband
<440>	Complaints per 1000 customers for fixed b	roadband 0.	0
<450>	Complaints per 1000 customers for mobile	broadband	

	npliance With Service Quality Standards and Consumer Protection Rules ection Form		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	300658	
<015>	Study Area Name	SYCAMORE TEL CO	
<020>	Program Year	2018	
<030>	Contact Name - Person USAC should contact regarding this data	Shelley Ross	
<035>	Contact Telephone Number - Number of person identified in data line <030>	4129276012 ext.	
<039>	Contact Email Address - Email Address of person identified in data line <030>	shelley.ross@syctelco.com	
<500>	Certify compliance with applicable service quality standards and consumer pr	otection rules Yes	
		300658ohServiceQuality510.pdf	
<510>	Descriptive document for Service Quality Standards & Consumer Protection Ru	ules Compliance	
<515>	Certify compliance with applicable minimum service standards		

(600) Functionality in Emergency Situations		FCC Form 481		
Data Collection Form		OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013		
		July 2013		
<010> Study Area Code	300658			
<015> Study Area Name	CVCAMORE TEL CO			

(700) Price Offerings including Voice Rate Data  Data Collection Form		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010> Study Area Code	300658	
<015> Study Area Name	SYCAMORE TEL CO	
<020> Program Year	2018	
<030> Contact Name - Person USAC should contact regarding this data	Shelley Ross	
<035> Contact Telephone Number - Number of person identified in data l	line <030> 4129276012 ext.	
<039> Contact Email Address - Email Address of person identified in data	line <030> shelley.ross@syctelco.com	
<701> Residential Local Service Charge Effective Date 1/1/2017 <702> Single State-wide Residential Local Service Charge		

<703>	<a1></a1>	<a2></a2>	<a3></a3>	<b1></b1>	<b2></b2>	<b3></b3>	<b4></b4>	<b5></b5>	<c></c>
					Residential Local			Mandatory Extended Area	
	State	Exchange (ILEC)	SAC (CETC)	Rate Type	Service Rate	State Subscriber Line Charge	State Universal Service Fee	Service Charge	Total per line Rates and Fees
					See at	tached worksheet			
					<del>000 a</del>	taonoa workonoot			

(710) Broadbrand Price Offerings	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013

<010>	Study Area Code	00658
<015>	Study Area Name	SYCAMORE TEL CO
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Shelley Ross
<035>	Contact Telephone Number - Number of person identified in data line <030>	4129276012 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	shelley.ross@syctelco.com

<711>	<a1></a1>	<a2></a2>	<b1></b1>	<b2></b2>	<c></c>	<d1></d1>	<d2></d2>	<d3></d3>	<d4></d4>
	State	Exchange (ILEC)	Residential Rate	State Regulated Fees	Total Rate and Fees	Broadband Service - Download Speed (Mbps)	Broadband Service - Upload Speed (Mbps)	Usage Allowance (GB)	Usage Allowance Action Taken When Limit Reached {select }
				- See attac worksheet -	hed				
				worksneet -					
				_	_				-

(8	300) Operating Companies	FCC Form 481
D	ata Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
		July 2013

<010>	Study Area Code		300658
<015>	Study Area Name		SYCAMORE TEL CO
<020>	Program Year		2018
<030>	Contact Name - Person L	JSAC should contact regarding this data	Shelley Ross
<035>	Contact Telephone Num	ber - Number of person identified in data line <030>	4129276012 ext.
<039>	Contact Email Address -	Email Address of person identified in data line <030>	shelley.ross@syctelco.com
<810>	Reporting Carrier	Sycamore Telephone Company	
<811>	Holding Company	Not Applicable	
<812>	Operating Company	NA	

<813>	<a1></a1>	<a2></a2>	<a3></a3>
	Affiliates	SAC	Doing Business As Company or Brand Designation
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(900) Tribal Lands Reporting Data Collection Form		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010> <015> <020> <030> <035> <039>	Study Area Code  Study Area Name  Program Year  Contact Name - Person USAC should contact regarding this data  Contact Telephone Number - Number of person identified in data line <030>  Contact Email Address - Email Address of person identified in data line <030>  Does the filing entity offer tribal land services? (Y/N)	300658  SYCAMORE TEL CO  2018  Shelley Ross 4129276012 ext. shelley.ross@syctelco.com  No
<910> <920>	Tribal Land(s) on which ETC Serves  Tribal Government Engagement Obligation	
If your company serves Tribal lands, please select (Yes,No, NA) for each these boxes to confirm the status described on the attached PDF, on line 920, demonstrates coordination with the Tribal government pursuant to § 54.313(a)(9) includes:		Name of Attached Document  Select Yes or No or Not Applicable
<921> <922> <923> <924> <925> <926> <927> <928> <927> <928>	Needs assessment and deployment planning with a focus on Tribal community anchor institutions. Feasibility and sustainability planning; Marketing services in a culturally sensitive manner; Compliance with Rights of way processes Compliance with Land Use permitting requirements Compliance with Facilities Siting rules Compliance with Environmental Review processes Compliance with Cultural Preservation review processes Compliance with Tribal Business and Licensing requirements.	

	oice and Broadband Service Rate Comparability lection Form	FCC Form 481  OMB Control No. 3060-0986/OMB Control No. 3060-0819  July 2013
<010>	Study Area Code	300658
<015>	Study Area Name	SYCAMORE TEL CO
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Shelley Ross
<035>	Contact Telephone Number - Number of person identified in data line <030	0> 4129276012 ext.
<039>	Contact Email Address - Email Address of person identified in data line <03	30> shelley.ross@syctelco.com
<1000>	Voice services rate comparability certification	Yes
<1010>	Attach detailed description for voice services rate comparability compliance	
		Name of Attached Document
<1020>	Broadband comparability certification	Yes - Pricing is no more than the most recent applicable benchmark announced by the Wireline Competition Bureau
<1030>	Attach detailed description for broadband comparability compliance	
		Name of Attached Document

(1100) No Terrestrial Backhaul Reporting Data Collection Form				FCC Form 481 OMB Control No July 2013	. 3060-0986/OMB Control No. 3060-0819
<010>	Study Area Code	300658			
<015>	Study Area Name	SYCAMOR	E TEL CO		
<020>	Program Year	2018			
<030>	Contact Name - Person USAC should contact regarding this data	Shelley	Ross		
<035>	Contact Telephone Number - Number of person identified in data line <030>	4129276	012 ext.		
<039>	Contact Email Address - Email Address of person identified in data line <030>	shelley	.ross@syctelco.com		
<1100>	Certify whether terrestrial backhaul options exist (Y/N)		Yes		
<1130>	Please select the appropriate response (Yes, No, Not Applicable) to confirm the reporting carrier offers broadband service of at least 1 Mbps downstream and 256 upstream within the supported area pursuant to § 54.313(g).	kbps			

(1200) Te	erms and Condition for Lifeline Customers		FCC Form 481
Lifeline			OMB Control No. 3060-0986/OMB Control No. 3060-0819
<b>Data Coll</b>	ection Form		July 2013
<010>	Study Area Code	300658	
<015>	Study Area Name	SYCAMORE TEL CO	
<020>	Program Year	2018	
<030>	Contact Name - Person USAC should contact regarding this data	Shelley Ross	
<035>	Contact Telephone Number - Number of person identified in data line <030	> 4129276012 ext.	
<039>	Contact Email Address - Email Address of person identified in data line <030	O> shelley.ross@syctelco.com	
		200650071   5 -1  1010   -15	
		3006580Hlifeline1210.pdf	
<1210>	Terms & Conditions of Voice Telephony Lifeline Plans		
			Name of Attached Document
<1220>	Link to Public Website HTTP		
	-		
	heck these boxes below to confirm that the attached document(s), on line 1210,		
	bsite listed, on line 1220, contains the required information pursuant to		
	(a)(2) annual reporting for ETCs receiving low-income support, carriers must		
annually	report:		
<1221>	Information describing the torms and conditions of anywaics		
<1221>	Information describing the terms and conditions of any voice telephony service plans offered to Lifeline subscribers,		
	telephony service plans offered to Elicinic subscribers,		
<1222>	Details on the number of minutes provided as part of the plan,		
<1223>	Additional charges for toll calls, and rates for each such plan.		
-	<u></u>		

(2005) Price Cap Carrier Additional DocumentationFCC Form 481Data Collection FormOMB Control No. 3060-0986/OMB Control No. 1000-0986/OMB Control No. 3060-0986/OMB Control No.	o. 3060-0819
<010> Study Area Code 300658	
<015> Study Area Name SYCAMORE TEL CO	
<020> Program Year 2018	
<030> Contact Name - Person USAC should contact regarding this data Shelley Ross	
<035> Contact Telephone Number - Number of person identified in data line <030> 4129276012 ext.	
<039> Contact Email Address - Email Address of person identified in data line <030> shelley.ross@syctelco.com	

Select the appropriate responses below (Yes, No, Not Applicable) to note compliance as a recipient of Incremental High Cost support, High Cost support to offset access charge reductions, and Connect America Phase II support as set forth in 47 CFR § 54.313(b),(c),(d),(e). The information reported on this form and in the documents attached below is accurate.

### **Incremental Connect America Phase I reporting**

<2011>	3rd Year Certification 47 CFR §54.313(b)(1)(ii) - Note that for the July 2017 certification, this applies to Round 2 recipients of Incremental Support.		
<2022>	Recipient certifies, representing year three after filing a notice of acceptance of funding pursuant to 54.312(c), that the locations in		
	question are not receiving support under the Broadband Initiatives Program or the Broadband Technology Opportunities Program for		
	projects that will provide broadband with speeds of at least 4 Mbps/1Mbps - 54.313(b)(2)(i). Round 2 recipients only.	<u></u>	
<2023>	The attachment on line 2024 includes a statement of the total amount of capital funding expended in the previous year in meeting Connect		
	America Phase I deployment obligations, accompanied by a list of census blocks indicating where funding was spent. This covers		
	year three - 54.313(b)(2)(ii). Round 2 recipients only.		
<2024A>	Round 2 Recipient of Incremental Support?		
<2024B>	Attach list of census blocks indicating where funding was spent in year three - 54.313(b)(2)(ii). Round 2 recipients only.	Name of Attached Document Listing Required Information	
<2025A>	Round 2 Recipient of Incremental Support?	Required information	
<2025B>	Attach geocoded Information for Phase I milestone reports (Round 2 for	Name of Attached Document Listing	
	year three) - Connect America Fund , WC Docket 10-90, Report and Order, FCC 13-73, paragraph 35 (May 22, 2013).	Required Information	
<2015>	2016 and future Frozen Support Certification 47 CFR § 54.313(c)(4)		
<b>\</b> 2013\	2010 and fatale 1102en Support certification 47 Critis 34.313(c)(4)		

Data Collection Fo	Carrier Additional Documentation orm Return Carriers affiliated with Price Cap Local Exchange Carriers	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013		
<2016>	p Carrier Connect America ICC Support {47 CFR § 54.313(d)} Certification support used to build broadband America Phase II Reporting {47 CFR § 54.313(e)}			
<2017A>	Connect America Fund Phase II recipient?			
<2017C>	Total amount of Phase II support, if any, the price cap carrier used for capital expenditures in 2016.			
<2018>	Attach the number, names, and addresses of community anchor institutions to which the carrier newly began providing access to broadband service in the preceding calendar year - 54.313(e)(1)(ii)(A)	Name of Attached Document Listing Required Information		
<2019>	Recipient certifies that it bid on category one telecommunications and Internet access services in response to all FCC Form 470 postings seeking broadband service that meets the connectivity targets for the schools and libraries universal service support program for eligible schools and libraries located within any area in a census block where the carrier is receiving Phase II model-based support, and that such bids were at rates reasonably comparable to rates charged to eligible schools and libraries in urban areas for comparable offerings - 54.313(e)(1)(ii)(C)			

(3005) Rate Of Return Carrier Additional Documentation	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013

<010>	Study Area Code	300658
<015>	Study Area Name	SYCAMORE TEL CO
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Shelley Ross
<035>	Contact Telephone Number - Number of person identified in data line <030>	4129276012 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	shelley.ross@syctelco.com

Select from the drop down menu or check the boxes below to note compliance with 54.313(f)(1). Privately held carriers must ensure compliance with the financial reporting requirements set forth in 47 CFR 54.313(f)(2). I further certify that the information reported on this form and in the documents attached below is accurate.

	Progress Report on 5 Year Plan			
(3009)	Carrier certifies to 54.313(f)(1)(iii)			
(3010A)	Certification of Public Interest Obligations {47 CFR § 54.313(f)(1)(i)}	Y	Yes - Attach Certifica	300658ohPublicInterest3010B.pdf
(3010B)	Please Provide Attachment	Name of Attached Docu Information	ument Listing Required	
(3012A)	Community Anchor Institutions {47 CFR § 54.313(f)(1)(ii)}	No - No New Community	Anchors	
(3012B)	Please Provide Attachment	Name of Attached Docu Information	ument Listing Required	
(3013)	Is your company a Privately Held ROR Carrier {47 CFR § 54.313(f)(2)}	(Yes/No)	<b>O</b> O	
(3014)	If yes, does your company file the RUS annual report	(Yes/No)	• 0	
(3015)	Please check these boxes to confirm that the attached PDF, on line 3017, contains the required information pursuant to § 54.313(f)(2) compliance requires:  Electronic copy of their annual RUS reports		~	
	(Operating Report for Telecommunications Borrowers)			
(3016)	Document(s) with Balance Sheet, Income Statement and Statement of Cash Flows			300658oh3017.pdf
(3017)	If the response is yes on line 3014, attach your company's RUS annual report and all required documentation	Name of Attached Docu Information	ament Listing Required	
(3018)	If the response is no on line 3014, is your company audited? If the response is yes on line 3018, please check the boxes below to confirm your submission on line	(Yes/No)	0 0	
(3019)	3026 pursuant to § 54.313(f)(2), contains: Either a copy of their audited financial statement; or (2) a financial report in a format comparable to RUS Operating Report for Telecommunications Borrowers			
(3020)	Document(s) for Balance Sheet, Income Statement and Statement of Cash Flows			
(3021)	Management letter and/or audit opinion issued by the independent certified public accountant that performed the company's financial audit. If the response is no on line 3018, please check the boxes below to confirm your submission on line 3026 pursuant to § 54.313(f)(2), contains:			
(3022)	Copy of their financial statement which has been subject to review by an independent certified public accountant; or 2) a financial report in a format comparable to RUS Operating Report for Telecommunications Borrowers			
(3023)	Underlying information subjected to a review by an independent certified public accountant			
(3024)	Underlying information subjected to an officer certification.			
(3025)	Document(s) with Balance Sheet, Income Statement and Statement of Cash Flows			Г
(3026)	Attach the worksheet listing required information	Name of Attached Docu Information	ument Listing Required	

(3005) Rate Of Return Carrier Additional Documentation (Continued)	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013

<010>	Study Area Code	300658
<015>	Study Area Name	SYCAMORE TEL CO
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Shelley Ross
<035>	Contact Telephone Number - Number of person identified in data line <030>	4129276012 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	shelley.ross@syctelco.com

Financial Data Summary	
(3027) Revenue	
` '	
(3028) Operating Expenses	
(3029) Net Income	
(3030) Telephone Plant In Service(TPIS)	
(2024) T-+-! A+-	
(3031) Total Assets	
(3032) Total Debt	
(3032) Total Dest	
(3033) Total Equity	
(2024) 5: : 1	
(3034) Dividends	

(4005) Rural Broadband Experin	nent Additional Documentation	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819
		July 2013

<010>	Study Area Code	300658
<015>	Study Area Name	SYCAMORE TEL CO
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Shelley Ross
<035>	Contact Telephone Number - Number of person identified in data li	ne <030> 4129276012 ext.
<039>	Contact Email Address - Email Address of person identified in data l	ine <030> shelley.ross@syctelco.com

### 4005 Rural Broadband Experiment

Authorized Rural Broadband Experiment (RBE) recipients must address the certification for public interest obligations, provide a list of newly served community anchor institutions, and provide a list of locations where broadband has been deployed.

### Public Interest Obligations – FCC 14-98 (paragraphs 26-29, 78)

Please address Line 4001 regarding compliance with the Commission's public interest obligations. All RBE participants must provide a response to Line 4001.

**4001**. Recipient certifies that it is offering broadband to the identified locations meeting the requisite public interest obligations consistent with the category for which they were selected, including broadband speed, latency, usage capacity, and rates that are reasonably comparable to rates for comparable offerings in urban areas?

### Community Anchor Institutions – FCC 14-98 (paragraph 79)

**4003a**. RBE participants must provide the number, names, and addresses of community anchor institutions to which they newly deployed broadband service in the preceding calendar year. On this line, please respond (yes – attach new community anchors, no – no new anchors) to indicate whether this list will be provided.

### If yes to 4003A, please provide a response for 4003B.

speed and data usage allowances available in the

relevant geographic area.

in yes to record, prease provide a response for rec	<del></del> -	
<b>4003b</b> . Provide the number, names and addresses of community anchor institutions to which the recipient newly began providing access to broadband service in the preceding calendar year.	Name of Attached Document Listing Required Information	_
Broadband Deployment Locations – FCC 14-98 (pa	ragraph 80)	
<b>4004a</b> . Attach a list of geocoded locations to which broadband has been deployed as of the June 1st immediately preceding the July 1st filing deadline for the FCC Form 481.	Name of Attached Document Listing Required Information	_
<b>4004b</b> . Attach evidence demonstrating that the recipient is meeting the relevant public service obligations for the identified locations. Materials must at least detail the pricing, offered broadband	Name of Attached Document Listing Required Information	_

Certification - Reporting Carrier	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013

<010>	Study Area Code	300658
<015>	Study Area Name	SYCAMORE TEL CO
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Shelley Ross
<035>	Contact Telephone Number - Number of person identified in data line <030>	4129276012 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	shelley.ross@syctelco.com

### TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING ANNUAL REPORTING ON ITS OWN BEHALF:

# Certification of Officer as to the Accuracy of the Data Reported for the Annual Reporting for CAF or LI Recipients I certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the annual reporting requirements for universal service support recipients; and, to the best of my knowledge, the information reported on this form and in any attachments is accurate. Name of Reporting Carrier: Signature of Authorized Officer: Date Printed name of Authorized Officer: Title or position of Authorized Officer: Telephone number of Authorized Officer: Filing Due Date for this form:

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

	tion - Agent / Carrier lection Form	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	300658
<015>	Study Area Name	SYCAMORE TEL CO
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Shelley Ross
<035>	Contact Telephone Number - Number of person identified in data line <030>	4129276012 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	shelley.ross@syctelco.com

### TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING ANNUAL REPORTS ON THE CARRIER'S BEHALF:

I certify that (Name of Agent) <u>Consortia Consulting</u> also certify that I am an officer of the reporting carrier; my responsibi agent; and, to the best of my knowledge, the reports and data provide	is authorized to submit the information reported on behalf of the reporting carrier. I lities include ensuring the accuracy of the annual data reporting requirements provided to the authorized d to the authorized agent is accurate.
Name of Authorized Agent: Consortia Consulting	
Name of Reporting Carrier: SYCAMORE TEL CO	
Signature of Authorized Officer: CERTIFIED ONLINE	Date: 06/29/2017
Printed name of Authorized Officer: Steven Ekleberry	
Title or position of Authorized Officer: VP/Treasurer	
Telephone number of Authorized Officer: 4199276012 ext.	
Study Area Code of Reporting Carrier: 300658	Filing Due Date for this form: 07/03/2017
	by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment e 18 of the United States Code, 18 U.S.C. § 1001.

### TO BE COMPLETED BY THE AUTHORIZED AGENT:

Certification of Agent Authorized to File Annual Reports for CAF or LI Recipients on Be	ehalf of Reportin	ng Carrier
I, as agent for the reporting carrier, certify that I am authorized to submit the annual reports for universal service support recipients the data reported herein based on data provided by the reporting carrier; and, to the best of my knowledge, the information reporte		
Name of Reporting Carrier: SYCAMORE TEL CO		
Name of Authorized Agent Firm: Consortia Consulting		
Signature of Authorized Agent or Employee of Agent: CERTIFIED ONLINE	Date:	06/29/2017
Name of Authorized Agent Employee: Judy Christiansen		
Title or position of Authorized Agent or Employee of Agent Consultant		
Telephone number of Authorized Agent or Employee of Agent: 4028181322 ext.		
Study Area Code of Reporting Carrier: 300658 Filing Due Date for this form: 07/03/2017		
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S. 18 of the United States Code, 18 U.S.C. § 1001.	S.C. §§ 502, 503(b), or	fine or imprisonment under Title



(700) Price Offerings including Voice Rate Data	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013

<010>	Study Area Code	300658
<015>	Study Area Name	SYCAMORE TEL CO
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Shelley Ross
<035>	Contact Telephone Number - Number of person identified in data line <030>	4028181322 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	shelley.ross@syctelco.com
<701>	Residential Local Service Charge Effective Date 1/1/2017	

<703>

<702> Single State-wide Residential Local Service Charge

<a1></a1>	<a2></a2>	<a3></a3>	<b1></b1>	<b2></b2>	<b3></b3>	<b4></b4>	<b5></b5>	<c></c>
				Residential Local			Mandatory Extended Area	
State	Exchange (ILEC)	SAC (CETC)	Rate Type	Service Rate	State Subscriber Line Charge	State Universal Service Fee	Service Charge	Total per line Rates and Fees
OH	Sycamore		FR	11.5	0.0	0.0	0.0	11.5
ОН	McCutchenville		FR	11.5	0.0	0.0	0.0	11.5
OH	Melmore		FR	13.4	0.0	0.0	0.0	13.4

(710) Broadband Price Offerings
Data Collection Form

FCC Form 481

OMB Control No. 3060-0986/OMB Control No. 3060-0819

July 2013

<010>	Study Area Code	300658
<015>	Study Area Name	SYCAMORE TEL CO
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Shelley Ross
<035>	Contact Telephone Number - Number of person identified in data line <030>	4028181322 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	shelley.ross@syctelco.com

<711>	<a1></a1>	<a2></a2>	<b1></b1>	<b2></b2>	<c> <d1></d1></c>	<d2></d2>	<d3></d3>		<d4></d4>
	State	Exchange (ILEC)	Residential Rate	State Regulated Fees	Total Rates and Fees	Download Speed	Broadband Service -Upload Speed (Mbps)	Usage Allowance (GB)	Usage Allowance Action Taken
		All				(Mbps)			When Limit Reached {select} Other, No limit on usage allowance
	OH		54.95	0.0	54.95	10.0	1.0	999999	
	OH	All	64.95	0.0	64.95	15.0	1.0	999999	Other, No limit on usage allowance
	OH	All	74.95	0.0	74.95	20.0	1.0	999999	Other, No limit on usage allowance

State: Ohio

Sycamore Telephone Co.

Form 481 Line No.: 510 Compliance with Service Quality Standards and Consumer Protection

As Required by Ohio Administrative Code "4901:1-6-12 Service Requirements for Basic Local Exchange Service (BLES)" the local services provided by Sycamore Telephone Co. are provided under internal company operating procedures and tariffs which are in compliance with applicable Ohio Public Utility Commission orders and rules including:

### 4901:1-6-12(c)

- (1) BLES shall be installed within five business days of the receipt by a telephone company of a completed application for new access line service, unless the customer requests or agrees to a later date.
- (2) The requirements to install BLES in paragraph (c)(1) of this rule is not applicable where any of the following exist:
  - (a) A customer or applicant has not met pertinent tariff requirements.
  - (b) The need for special equipment or service.
  - (c) Military action, war, insurrection, riot or strike.
  - (d) The customer misses an installation appointment
- (3) A LEC shall make responsible efforts to repair a BLES outage within twenty-four hours, excluding Sundays and legal holidays, after the outage is reported to the telephone company.
- (4) A BLES service outage or service-affecting problem shall be repaired within seventy-two hours after it is reported to the telephone company.
- (5) If a BLES outage is reported to the telephone company and it lasts more than seventytwo hours, the LEC shall credit every affected BLES customer, of which the LEC is aware, in the amount of one month's charges for BLES.
- (6) The customer credit in paragraph (c)(5) of this rule is not applicable if the condition or failure to repair occurs as a result of any of the following:
  - (a) A customer's negligent or willful act
  - (b) Malfunction of customer-owned telephone equipment or inside wire.
  - (c) Military action, war, insurrection, riot, or strike
  - (d) Customer missing a repair appointment.

State: Ohio

Sycamore Telephone Co.

Form 481 Line No.: 610 Description of Functionality in Emergency Situations

Sycamore Telephone Co., pursuant to Ohio Administrative Code "4901:1 1-6-31 Emergency and Outage Operations".

### 4901:1-6-31 Emergency and outage operations.

- (A) Each Facilities-based local exchange carrier (LEC) shall design, operate and maintain its facilities to continue to provide customers with the ability to originate and receive calls at all times. This commission will utilize existing FCC rules applicable to emergency and outage operations. Companies shall submit outage reports utilizing, at the company's discretion, either existing FCC reports or a format determined by the commission.
- (B) Each facilities-based LEC shall submit, within two hours of discovery, to the commission's outage coordinator and when appropriate, the news media in the affected area, a notification that it has experienced an outage, whenever that outage occurs on any facility that it owns, operates, leases or otherwise utilizes and it both:
  - (1) Expected to last for a period in excess of thirty minutes.
  - (2) Potentially affects at least nine hundred thousand user minutes in the incumbent local calling area.
- (C) Each Facilities-based LEC shall report, by telephone or electronic means, a disruption of 9-1-1 services, which impairs 9-1-1 service within a given county 9-1-1 system, immediately to each county 9-1-1 public safety answering point, to the Ohio 9-1-1 coordinator, and to the news media in the affected area, when appropriate.
- (D) Each facilities-based LEC experiencing a loss of communications or selective routing to a public safety answering point, as a result of an outage described under paragraphs (B) and (C) of this rule, shall also notify, as soon as possible, by telephone or electronic means, any official who has been designated by the management of the affected 9-1-1 facility as the LEC's contact person for communication outages at that facility; and the LEC shall convey to that person all available information that may be useful to the management of the affected facility in mitigating the effects of the outage on efforts to communicate with that facility.
- (E) Each facilities-based LEC experiencing an outage described under paragraphs (B) and (C) of this rule, shall electronically submit to the commission's outage coordinator the same information as that provided to the FCC or the following information:
  - (1) A notification that it has experienced an outage, which shall include the name of the reporting entity, the date and time of the onset of the outage, a brief description of

State: Ohio

Sycamore Telephone Co.

Form 481 Line No.: 610 Description of Functionality in Emergency Situations

the problem, the particular service affected, the geographic area affected by the outage, the number of customers affected, an estimate of when the service, including 9-1-1, will be restored, and a contact name and telephone number by which the commission's outage coordinator at contact the reporting entity.

- (2) Not later than seventy-two hours after discovering the outage, an initial communications outage report, which shall include all pertinent information then available on the outage and shall be submitted in good faith.
- (3) Not later than thirty days after discovering the outage, the provider shall submit electronically a final communications outage report, which shall include all pertinent information on the outage, including any information that was not contained in, or that had changed from that provided in, the initial report.
- (F) Each facilities-based LEC shall develop, implement, and maintain an emergency plan and make it available for review by commission staff. The plan shall include, but not limited to, all of the following:
  - (1) Procedures for maintaining and annually updating a list of those customers who have subscribed to the federal telecommunications service priority program, as identified in 47 C.F.R. 64, appendix A.
  - (2) Procedures for priority treatment in restoring out-of-service trouble of an emergency nature for customers with documented medical or life-threatening condition.
  - (3) In addition to the telecommunications service priority program, each LEC shall develop policies and procedures regarding those customers who require priority treatment for out-of-service clearance. Such procedures shall include a table of restoration priority, including, but not limited to, subscribes such as police and fire stations, hospitals, key medical personnel, and other utilities.
  - (4) Procedures for restoring service to priority critical facilities customers.
  - (5) Identification and annual updates for all of the facilities-based LEC's critical facilities and reasonable measures to protect its personnel and facilities.
  - (6) Assessments and evaluations of telecommunications facilities available to provide back-up service capabilities.
  - (7) Procedures for after-action assessments and reporting following activation of any part of the emergency plan. An after-action report will be written and will include

State: Ohio

Sycamore Telephone Co.

Form 481 Line No.: 610 Description of Functionality in Emergency Situations

lessons learned, deficiencies in the response to the emergency, and deficiencies in the emergency plan.

- (8) A current list of names and telephone numbers of the facilities-based LEC's emergency service personnel to contact and coordinate with in the event of a real or anticipated local or national threats to its ability to provide telecommunications service.
- (9) A current list of the names and telephone numbers of the facilities-based LEC's emergency service personnel that is made available to the commission's emergency coordinator, upon request.
- (10) A continuity of operations plan to assume continuance of minimum essential functions during a large scale event in which staffing is reduced. Such plans shall provide for:
  - (a) Plan activation triggers such as the world health organization's pandemic phase alert levels, widespread transmission within the United States, or a case at one or more locations within Ohio.
  - (b) Identification of a pandemic coordinator and team with defined roles and responsibilities for preparedness and response planning.
  - (c) Identification of minimal essential functions, minimal staffing required to maintain such essential functions, and personnel resource pools required to ensure continuance of those functions in progressive stages associated with a declining workforce.
  - (d) Identification of essential employees and critical inputs (e.g., raw materials, equipment, suppliers, subcontractor services/products, and logistics) required to maintain business operations by location and function.
  - (e) Policies and procedures to address personal protection initiatives.
  - (f) Policies and procedures to maintain lines of communication with the public utilities commission of Ohio during a declared emergency.
  - (g) Each facilities-based LEC shall amend its emergency plan in accordance with the findings identified in the after-action assessment report required under paragraph (F)(7) of this rule.

### **Sycamore Telephone Company**

### **Lifeline Terms and Conditions**

Sycamore Telephone Company offers Lifeline program-supported service to qualified low-income residential consumers for one telephone line or qualifying broadband internet access service (BIAS) per eligible household. The Lifeline program provides discounts to eligible low-income consumers to help them establish and maintain telephone service. Eligible consumers can receive \$9.25 per month in discounts. In addition, the Federal Universal Service Charge is not assessed to consumers participating in Lifeline. Toll Blocking prevents the placement of all long distance calls for which a subscriber would be charged. Toll blocking is available to eligible consumers at no cost. Also, by choosing this option, consumers are usually not charged a deposit.

### **Lifeline Program Eligibility Information**

### **Program Based Eligibility**

Consumers are eligible for Lifeline if they, one of their dependents or their household participate in one of the following qualifying assistance programs:

- o Medicaid
- o Federal Public Housing Assistance (Section 8)
- Supplemental Nutrition Assistance Program (SNAP, formerly Food Stamps)
- Supplemental Security Income (SSI)
- o Veteran's Pension and Survivor Benefit

Lifeline applicants must present documentation demonstrating eligibility either through participation in one of the qualifying federal assistance programs or through income-based means.

Acceptable documentation of program-based eligibility includes: current or prior year's statement of benefits from a qualifying state, federal or Tribal program; notice letter of participation in a qualifying state, federal or Tribal program; program participation documents; or another official document evidencing the consumer's participation in a qualifying state, federal or Tribal program.

### **Income Based Eligibility**

In addition, consumers are eligible for Lifeline if their household income is at or below 135 % of the federal poverty guidelines.

Acceptable documentation of income eligibility includes: prior year's state, federal or Tribal tax return; current income statement from an employer or paycheck stub; social security statement of benefits; Veterans Administration statement of benefits; retirement/pension statement of benefits; unemployment/workmen's compensation statement of benefits; federal or Tribal notice of letter participating in General Assistance; or a divorce decree or child support award or other official document containing income information.

### **Lifeline Program Service**

Sycamore Telephone Company's voice Lifeline service includes unlimited local minutes-of-use within the toll-free calling area. Sycamore Telephone Company's voice Lifeline Plan does not include any free minutes-of-use for toll. Toll is billed at the standard toll rate depending on which interexchange carrier the consumer subscribes to for toll service. As part of the Lifeline service, Toll blocking is available to eligible consumers at no cost.

BIAS minimum speed and usage allowance standards are required for the service to qualify.

Lifeline recipients may transfer the Lifeline benefit to a new company once every sixty days for telephone service and once every 12 months for BIAS.

### **Rates**

Subscribers may receive the Lifeline credit on any type of local service, including bundled services that are normally offered by Sycamore. Advertised rates do not include any applicable taxes or surcharges.

### **Recertification of Lifeline Eligibility**

Lifeline recipients are required to recertify their eligibility annually. Failure to properly recertify a recipient's continued eligibility for the Lifeline program will result in termination of the Lifeline recipient's monthly Lifeline discount and de-enrollment from the Lifeline Program.

### **Additional Lifeline Program Information**

The Lifeline program is limited to one benefit per household, consisting of telephone or BIAS service. A household is defined, for purposes of the Lifeline program, as an individual or group of individuals who live together at the same address and share income and expenses. Lifeline is a government benefit program, and consumers who willfully make false statements in order to obtain the benefit can be punished by fine or imprisonment or can be barred from the program.

### **Sycamore Telephone Company**

### Certification of Public Interest Obligations

To be in compliance with the Certification of Public Interest Obligations:

- Sycamore Telephone Company certifies that it has taken reasonable steps to provide upon a reasonable request broadband service at actual speeds of 10 Mbps downstream/1 Mbps upstream with latency suitable for real-time applications, including Voice over Internet Protocol.
- The Company provides usage capacity that is reasonably comparable to comparable offerings in urban areas.
- The Company certifies that requests for such service are met within a reasonable amount of time.

REDACTED - FOR PUBLIC INSPECTION

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0572-0031. The time required to complete this information collection is estimated to average 4 hours per response, including the time for reviewing instructions,

searching existing data sources, gathering and maintaining to	he data needed, and con	pleting and reviewing	the c	collection of information.					
USDA-RUS	6		Thi	s data will be used by RUS to review your financial situation. You	r response is required by 7	U.S.C. 901 et seq.			
			-	l, subject to federal laws and regulations regarding confidential in	formation, will be treated a	s confidential.			
			ВО	RROWER NAME					
OPERATING REP	ORT FOR		T	he Sycamore Telephone Company					
TELECOMMUNICATION	S BORROWER	S							
INSTRUCTIONS-Submit report to RUS within 30 day					BORROWER DESIGNAT	ION			
For detailed instructions, see RUS Bulletin 1744-2. R	eport in wnoie aouar		December, 2016 OH0532						
We hereby certify that the entries in this	report are in accor.			<b>TIFICATION</b> ts and other records of the system and reflect the stat	us of the system				
to the best of our knowledge and belief.	report are in accord	aunce min me acco	Oun	is that other records of the system and reflect the state	us of the system				
			I, R	US, WAS IN FORCE DURING THE REPORTIN	IG PERIOD AND				
RENEWALS HAVE BEEN OBTAINE	ED FOR ALL POI	LICIES.							
DURING THE PERIO	D COVERED BY			RSUANT TO PART 1788 OF 7CFR CHAPTER X	(VII				
		(Crieck one	9 01 1	the following)					
X All of the obligations under the RUS loan doc have been fulfilled in all material respects.	uments			There has been a default in the fulfillment of the obligation under the RUS loan documents. Said default(s) is/are					
nave been fullilled in all material respects.				specifically described in the Telecom Operating Repo					
Richard Ekleberry		6/27/2017							
	-	DATE	-						
		PART A	A. B	ALANCE SHEET					
	BALANCE	BALANCE	Ϊ	ALAITOL OILLI	BALANCE	BALANCE			
ASSETS	PRIOR YEAR	END OF PERIOD		LIABILITIES AND STOCKHOLDERS' EQUITY	PRIOR YEAR	END OF PERIOD			
CURRENT ASSETS	TRIORIZAR	END OF TENIOR	CL	IRRENT LIABILITIES	T RIOR TEAR	END OF TEMOD			
Cash and Equivalents				. Accounts Payable					
Cash-RUS Construction Fund			1	Notes Payable					
3. Affiliates:				. Advance Billings and Payments					
a. Telecom, Accounts Receivable			1	Customer Deposits					
b. Other Accounts Receivable				Current Mat. L/T Debt					
c. Notes Receivable			1	Current Mat. L/T Debt-Rur. Dev.					
4. Non-Affiliates:				Current MatCapital Leases					
				Income Taxes Accrued					
a. Telecom, Accounts Receivable     b. Other Accounts Receivable			1	Other Taxes Accrued					
		<u> </u>							
c. Notes Receivable				Other Current Liabilities (25 thru 24)					
5. Interest and Dividends Receivable			1	. Total Current Liabilities (25 thru 34)					
6. Material Negraphleted			1	NG-TERM DEBT					
7. Material-Nonregulated				Funded Debt-RUS Notes					
8. Prepayments				Funded Debt-RTB Notes					
9. Other Current Assets			_	Funded Debt-FFB Notes Funded Debt-Other					
10. Total Current Assets (1 Thru 9)									
NONCURRENT ASSETS				Funded Debt-Rural Develop. Loan					
11. Investment in Affiliated Companies			1	Premium (Discount) on L/T Debt					
a. Rural Development				Reacquired Debt     Obligations Under Capital Lease					
b. Nonrural Development				· ·					
12. Other Investments				. Adv. From Affiliated Companies					
a. Rural Development				Other Long-Term Debt					
b. Nonrural Development				. Total Long-Term Debt (36 thru 45) "HER LIAB. & DEF. CREDITS					
13. Nonregulated Investments			1	Other Long-Term Liabilities					
Other Noncurrent Assets     Deferred Charges			1	Other Deferred Credits					
v			1						
16. Jurisdictional Differences			1	Other Jurisdictional Differences					
17. Total Noncurrent Assets (11 thru 16)				. Total Other Liabilities and Deferred Credits (47 thru 49)					
PLANT, PROPERTY, AND EQUIPMENT									
18. Telecom, Plant-in-Service				. Cap. Stock Outstand. & Subscribed					
19. Property Held for Future Use				Additional Paid-in-Capital					
20. Plant Under Construction				Treasury Stock  Membership and Con Contification					
21. Plant Adj., Nonop. Plant & Goodwill				Membership and Cap. Certificates					
22. Less Accumulated Depreciation			1	Other Capital  Patranaga Capital Credits					
23. Net Plant (18 thru 21 less 22)				Patronage Capital Credits  Patronage Capital Credits					
24. TOTAL ASSETS (10+17+23)				Retained Earnings or Margins					
				. Total Equity (51 thru 57)					
			159	TOTAL LIABILITIES AND EQUITY (35+46+50+58)					

Total Equity = % of Total Assets

USDA-RUS

# OPERATING REPORT FOR TELECOMMUNICATIONS BORROWERS

BORROWER DESIGNATION

OH0532

PERIOD ENDING

INSTRUCTIONS- See RUS Bulletin 1744-2

December, 2016

PART B. STATEMENTS OF INCOME AND RETAINED E	ARNINGS OR MARGINS	
ITEM	PRIOR YEAR	THIS YEAR
Local Network Services Revenues		
Network Access Services Revenues		
3. Long Distance Network Services Revenues		
Carrier Billing and Collection Revenues		
5. Miscellaneous Revenues		
6. Uncollectible Revenues		
7. Net Operating Revenues (1 thru 5 less 6)		
Plant Specific Operations Expense		
Plant Nonspecific Operations Expense (Excluding Depreciation & Amortization)		
10. Depreciation Expense		
11. Amortization Expense		
12. Customer Operations Expense		
13. Corporate Operations Expense		
14. Total Operating Expenses (8 thru 13)		
15. Operating Income or Margins (7 less 14)		
16. Other Operating Income and Expenses		
17. State and Local Taxes		
18. Federal Income Taxes		
19. Other Taxes		
20. Total Operating Taxes (17+18+19)		
21. Net Operating Income or Margins (15+16-20)		
22. Interest on Funded Debt		
23. Interest Expense - Capital Leases		
24. Other Interest Expense		
25. Allowance for Funds Used During Construction		
26. Total Fixed Charges (22+23+24-25)		
27. Nonoperating Net Income		
28. Extraordinary Items		
29. Jurisdictional Differences		
30. Nonregulated Net Income		
31. Total Net Income or Margins (21+27+28+29+30-26)		
32. Total Taxes Based on Income		
33. Retained Earnings or Margins Beginning-of-Year		
34. Miscellaneous Credits Year-to-Date		
35. Dividends Declared (Common)		
36. Dividends Declared (Preferred)		
37. Other Debits Year-to-Date		
38. Transfers to Patronage Capital		
39. Retained Earnings or Margins End-of-Period [(31+33+34) - (35+36+37+38)]		
40. Patronage Capital Beginning-of-Year		
41. Transfers to Patronage Capital		
42. Patronage Capital Credits Retired		
43. Patronage Capital End-of-Year (40+41-42)		
44. Annual Debt Service Payments		
45. Cash Ratio [(14+20-10-11) / 7]		
46. Operating Accrual Ratio [(14+20+26) / 7]		
47. TIER [(31+26) / 26]		
48. DSCR [(31+26+10+11) / 44]		
** / *		

# OPERATING REPORT FOR TELECOMMUNICATIONS BORROWERS

BORROWER DESIGNATION OH0532 PERIOD ENDED

December, 2016

INSTRUCTIONS - See RUS Bulletin 1744-2

	Part C. SUBSCRIBER (ACCESS LINE), ROUTE MILE, & HIGH SPEED DATA INFORMATION										
	1. RA	TES	2. SUBS	CRIBERS (ACCESS LIN	ES)	3. ROUTE	MILES				
EXCHANGE	B-1 R-1 (a) (b)		BUSINESS (a)	RESIDENTIAL (b)	TOTAL (c)	TOTAL (including fiber) (a)	FIBER (b)				
Sycamore	(u)	(5)	(u)	(0)	(0)	(4)	(2)				
Melmore											
McCutchenville											
MobileWireless		\				-					
Route Mileage Outside Exchange Area					_						
Total	•										
No. Exchanges				-							

USDA-RUS

## REDACTED - FOR PUBLIC INSPECTION OPERATING REPORT FOR

OPERATING REPORT FOR TELECOMMUNICATIONS BORROWERS

BORROWER DESIGNATION
OH0532
PERIOD ENDED

December, 2016

INSTRUCTIONS - See RUS Bulletin 1744-2

	Part C	C. SUBSCRIBER (	ACCESS LINE),	ROUTE MILE, &	& HIGH SPEED	DATA INFORMA	ATION	
			4. B	ROADBAND SERV	/ICE			
				Detail	s on Least Expen	sive Broadband S	ervice	
EXCHANGE	No. Access Lines with BB available (a)	No Of Broadband Subscribers (b)	Number Of Subscribers (c)	Advertised Download Rate (Kbps) (d)	Standalone/Pckg (f)	Type Of Technology (g)		
Sycamore								
Melmore								
McCutchenville								
Total				-		-	-	

### **REDACTED - FOR PUBLIC INSPECTION** BORROWER DESIGNATION OH0532 **OPERATING REPORT FOR** PERIOD ENDING **TELECOMMUNICATIONS BORROWERS** December, 2016 INSTRUCTIONS- See RUS Bulletin 1744-2 PART D. SYSTEM DATA 1. No. Plant Employees 2. No. Other Employees 3. Square Miles Served 4. Access Lines per Square Mile 5. Subscribers per Route Mile PART E. TOLL DATA Study Area ID Code(s) 2. Types of Toll Settlements (Check one) X Cost Basis Average Schedule Interstate: Average Schedule Cost Basis Intrastate: PART F. FUNDS INVESTED IN PLANT DURING YEAR 1. RUS, RTB, & FFB Loan Funds Expended 2. Other Long-Term Loan Funds Expended 3. Funds Expended Under RUS Interim Approval 4. Other Short-Term Loan Funds Expended 5. General Funds Expended (Other than Interim) 6. Salvaged Materials 7. Contribution in Aid to Construction 8. Gross Additions to Telecom. Plant (1 thru 7) PART G. INVESTMENTS IN AFFILIATED COMPANIES CURRENT YEAR DATA CUMULATIVE DATA Cumulative Cumulative INVESTMENTS Investment Investment Income/Loss Current

Income/Loss

This Year

(c)

To Date

(d)

To Date

(e)

This Year

(b)

Investment in Affiliated Companies - Rural Development Investment in Affiliated Companies - Nonrural Development Balance

(f)

USDA-RUS

BORROWER D	ESIGNATION		
ОН0532			
PERIOD ENDIN	IG		
December,	2016		

OOD/T/NOO	BONNOWEN BEGIGNATION				
OPERATING REPORT FOR	OH0532				
TELECOMMUNICATIONS BORROWERS	PERIOD ENDING				
	December, 2016				
PART H. CU	RRENT DEPRECIATION RATES				
Are corporation's depreciation rates approved by the regulatory authority with jurisdiction over the provision of telephone services? (Check one)		X YES NO			
EQUIPMENT CATEGORY		DEPRECIATION RATE			
Land and support assets - Motor Vehicles					
Land and support assets - Aircraft					
Land and support assets - Special purpose vehicles					
<ol><li>Land and support assets - Garage and other work equipmen</li></ol>					
5. Land and support assets - Buildings					
6. Land and support assets - Furniture and Office equipment					
7. Land and support assets - General purpose computers					
Central Office Switching - Digital					
Central Office Switching - Analog & Electro-mechanical					
Central Office Switching - Operator Systems					
11. Central Office Transmission - Radio Systems					
12. Central Office Transmission - Circuit equipment					
13. Information origination/termination - Station apparatus					
14. Information origination/termination - Customer premises wiri	ng				
15. Information origination/termination - Large private branch ex	changes				
16. Information origination/termination - Public telephone termination	al equipment				
17. Information origination/termination - Other terminal equipment	nt				
18. Cable and wire facilities - Poles					
19. Cable and wire facilities - Aerial cable - Metal					
20. Cable and wire facilities - Aerial cable - Fiber					
21. Cable and wire facilities - Underground cable - Metal					
22. Cable and wire facilities - Underground cable - Fiber					
23. Cable and wire facilities - Buried cable - Metal					
24. Cable and wire facilities - Buried cable - Fiber					
25. Cable and wire facilities - Conduit systems					
26. Cable and wire facilities - Other					

**BORROWER DESIGNATION** USDA-RUS OH0532 **OPERATING REPORT FOR** PERIOD ENDED **TELECOMMUNICATIONS BORROWERS** December, 2016 INSTRUCTIONS - See help in the online application. **PART I – STATEMENT OF CASH FLOWS** 1. Beginning Cash (Cash and Equivalents plus RUS Construction Fund) **CASH FLOWS FROM OPERATING ACTIVITIES** 2. **Net Income** Adjustments to Reconcile Net Income to Net Cash Provided by Operating Activities 3. Add: Depreciation 4. Add: Amortization 5. Other (Explain) Changes in Operating Assets and Liabilities 6. Decrease/(Increase) in Accounts Receivable 7. Decrease/(Increase) in Materials and Inventory 8. Decrease/(Increase) in Prepayments and Deferred Charges 9. Decrease/(Increase) in Other Current Assets 10. Increase/(Decrease) in Accounts Payable 11. Increase/(Decrease) in Advance Billings & Payments Increase/(Decrease) in Other Current Liabilities 13. Net Cash Provided/(Used) by Operations **CASH FLOWS FROM FINANCING ACTIVITIES** 14. Decrease/(Increase) in Notes Receivable 15. Increase/(Decrease) in Notes Payable 16. Increase/(Decrease) in Customer Deposits 17. Net Increase/(Decrease) in Long Term Debt (Including Current Maturities) 18. Increase/(Decrease) in Other Liabilities & Deferred Credits 19. Increase/(Decrease) in Capital Stock, Paid-in Capital, Membership and Capital Certificates & Other Capital 20. Less: Payment of Dividends 21. Less: Patronage Capital Credits Retired 22. Other (Explain) 23. Net Cash Provided/(Used) by Financing Activities **CASH FLOWS FROM INVESTING ACTIVITIES** 24. Net Capital Expenditures (Property, Plant & Equipment) 25. Other Long-Term Investments 26 Other Noncurrent Assets & Jurisdictional Differences 27. Other (Explain) 28. Net Cash Provided/(Used) by Investing Activities 29. Net Increase/(Decrease) in Cash

30.

**Ending Cash** 

REDACTED - FOR PUBLIC INSPECTION					
USDA-RUS	BORROWER DESIGNATION				
OPERATING REPORT FOR TELECOMMUNICATIONS BORROWERS	ОН0532				
INSTRUCTIONS - See RUS Bulletin 1744-2	PERIOD ENDED December, 2016				
NOTES TO THE OPERATING REPORT FOR TELECOMMUNICATIONS BORROWERS					

REDACTED - FOR TUBLIC INSTECTION				
USDA-RUS	BORROWER DESIGNATION			
OPERATING REPORT FOR TELECOMMUNICATIONS BORROWERS	OH0532			
INSTRUCTIONS - See RUS Bulletin 1744-2	PERIOD ENDED December, 2016			
CERTIFICATION LOAN DEFAULT NOTES TO THE OPERATING REPORT FOR TELECOMMUNICATIONS BORROWERS				